



STATE OF TENNESSEE
DEPARTMENT OF COMMERCE AND INSURANCE
AUCTIONEER COMMISSION

500 JAMES ROBERTSON PARKWAY
NASHVILLE, TENNESSEE 37243-1153

APPLICATION FOR PUBLIC AUTOMOBILE AUCTIONEER LICENSE

Pursuant to the Laws of the State of Tennessee and in accordance with the provisions of Section 62-19-101 et seq., as amended. Application is hereby made for a license to conduct business in the State of Tennessee as indicated.

1. NAME

Name of individual applying for public automobile auctioneer license

2. ADDRESS _____

3. DATE OF BIRTH _____

4. AUCTIONEER LICENSE NUMBER _____

5. DATES DURING WHICH YOU HAVE ACTUALLY SERVED AS A LICENSED AUCTIONEER

6. DATE OF SUCCESSFUL COMPLETION OF THIRTY (30) HOURS OF INSTRUCTION IN AUTOMOBIL AUCTIONEERING _____

7. NAME AND ADDRESS OF AUCTION SCHOOL _____

8. HAVE YOU EVER HELD A LICENSE ISSUED BY THE STATE THAT HAS BEEN REVOKED, SUSPENDED, OR REFUSED FOR RENEWAL?

_____ IF "YES", EXPLAIN BELOW:

9. I HEREBY CERTIFY THAT THE STATEMENTS IN, OR ATTACHED TO THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF; THAT THE MEMEBERS OF THIS ORGANIZATION ARE FAMILIAR WITH THE PROVISIONS OF THE LAW UNDER WHICH THIS APPLICATION IS MADE; AND THAT I, AS PROPRIETOR, PARTNER, OR PROPER OFFICER OF THE CORPORATION, HAVE AUTHORITY TO MAKE THE STATEMENTS CONTAINED HEREIN.

DATE: _____

SIGNED: _____

PERSONAL SIGNATURE OF APPLICANT

E-MAIL ADDRESS: _____

TITLE: _____

9. STATE OF _____

COUNTY OF _____

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME THIS _____, DAY OF _____ 20_____

(SEAL) MY COMMISSION EXPIRES _____

NOTARY PUBLIC

MUST FURNISH A CERTIFIED CURRENT FINANCIAL STATEMENT **IMPORTANT:** ALL PERSONS MAKING APPLICATION FOR PUBLIC
AUTOMOBILE AUCTION LICENSE FOR THE **FIRST TIME**.

MAIL APPLICATION AND FEE TO THE: TENNESSEE AUCTIONEER COMMISSION
500 JAMES ROBERTSON PKWY. 6th FLOOR
NASHVILLE, TN 37243-1153